13938/

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
FORM LIMITED OFFERING EXEMPTION

| OMB APPROVAL | | | | | |
|-------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0076 | | | | |
| Expires: | | | | | |
| Estimated average | e burden | | | | |
| hours per respons | e 16.00 | | | | |

| SEC USE ONLY | | | | | | |
|---------------|--------|--|--|--|--|--|
| Prefix | Serial | | | | | |
| į | ! | | | | | |
| DATE RECEIVED | | | | | | |
| 1 | 1 | | | | | |

| Name of Offering (check if this is an amendment and name has changed, and indicate change.) | |
|---|--|
| Prom Resources, Inc. \$1m 504 Offering | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment | ULOE |
| A. BASIC IDENTIFICATION DATA | 1/3. |
| 1. Enter the information requested about the issuer | AF > 1: 2007 |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Prom Resources, Inc. | 13 |
| Address of Executive Offices (Number and Street, City, State, Zip Code) 220 soi Prem Sombat 5, Pracha Songkro, Din Deang Bangkok 10400, Thailand | Telephone Number (Including Area Code) (945) 697-2199 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) | Telephone Number (Including Area Code) |
| Brief Description of Business | F MAR 2 4 and |
| Type of Business Organization organization limited partnership, already formed business trust limited partnership, to be formed other (p | lease specify): THOMSON FINANCIAL |
| Actual or Estimated Date of Incorporation or Organization: O 2 9 6 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction) | nated |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate tederal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

| A. BASIC IDENTIFICATION DATA | |
|---|--|
| 2. Enter the information requested for the following: | |
| Each promoter of the issuer, if the issuer has been organized within the past five years; | |
| Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more | of a class of equity securities of the issuer. |
| Each executive officer and director of corporate issuers and of corporate general and managing partners of | f partnership issuers; and |
| Each general and managing partner of partnership issuers. | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) Dror Moradov | |
| Business or Residence Address (Number and Street, City, State, Zip Code) 220 soi Prem Sombat 5, Pracha Songkro, Din Deang Bangkok 10400, Thailand | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business of Residence Address (Number and Street, City, State, Zip Code) | |
| (Use blank sheet, or copy and use additional copies of this sheet, as necessar | ry) |

| | | | | , | B. II | NFORMAT | ON ABOU | T OFFERD | NG | | | | |
|--|---|-------------|-----------------|------------|-------------|--------------|-------------|----------|---|--------------------|-------------|-------------|---------|
| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | | | Yes | No ⊠ | | | |
| Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | | | _ | _ | |
| 2. What is the minimum investment that will be accepted from any individual? | | | | | | | | | | | s_10, | 00.00 | |
| 2. Donatha official accomplished accompanying of a six-la conic | | | | | | | | | | Yes | No | | |
| | | | | | | | | | | | X | | |
| 0 0 | commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. | | | | | | | | | | | | |
| Full N | Vame (I | Last name | first, if indi | vidual) | | | | | • | | | <u>_</u> _ | |
| Busin | ness or | Residence | Address (N | umber and | Street, Ci | ty, State, Z | ip Code) | | | | | | <u></u> |
| Name | of Ass | sociated Br | oker or De | aler | <u></u> | | | .,, | | | | | |
| States | s in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit | Purchasers | · | | | | | |
| | | | or check | | | | | | , | | | □ AI | States |
| г | ĀL | [AK] | AZ | ĀR | CA | CO | CT | DE | [DC] | FL | (GA) | HI | ID |
| _ | IL] | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| Ī | MT | NE | NV | NH | NJ | NM | NY | NC | ND | OH | OK | OR | PA |
| | RI | [SC] | \overline{SD} | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Full 1 | Name (| Last name | first, if indi | vidual) | | | | | | | | | |
| Busin | ness or | Residence | Address (? | Number an | d Street, C | ity, State, | Zip Code) | • | | | | | |
| Name | of Ass | sociated Bi | oker or De | aler | | | | | | | | | |
| States | s in Wh | iich Person | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| (| Check | "All States | s" or check | individual | States) | | | | *************************************** | ••••• | | ☐ Al | States |
| Г | AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | Ш | ID |
| _ | IL | IN | ĪĀ | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | ΜT | NE | NV | ИН | ĺИĴ | NM | NY | NC | ND | OH | OK | OR | PA |
| | RI | SC | SD | [TN] | TX | UT | [VT] | VĀ | [WA] | [WV] | WI | WY | PR |
| Full 1 | Name (| Last name | first, if ind | ividual) | | | | | | | | | |
| Busin | ieśs or | Residence | : Address (1 | Number an | d Street, C | ity, State, | Zip Code) | | | | | | |
| Name | e of Ass | sociated Bi | roker or De | aler | | | | | | | | | |
| States | s in Wh | ich Persor | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| (| (Check | "All States | s" or check | individual | States) | | | | | ****************** | ······ | □ Al | States |
| Г | AL | ÄK | ĀZ | AR | CA | CO | CT | DE | DC | FL | GA. | Н | (ID) |
| _ = | ΪĹ | IN | ĪA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | [N] | NM | NY | NC | ND | ОН | OK. | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | V۸ | $\overline{\mathbf{W}}$ | WV | WI | WY | PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
|----|--|-----------------------------|--|
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | | _ | |
| | Debt | | \$ |
| | Equity | 1,000,000.00 | \$_10,000.00 |
| | Common Preferred | | |
| | Convertible Securities (including warrants) | \$ | S |
| | Partnership Interests | \$ | \$ |
| | Other (Specify) | | |
| | Total | 1,000,000.00 | \$_10,000.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number Investors | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | | \$ 10,000.00 |
| | Non-accredited Investors | | \$ 0.00 |
| | | | \$ 10,000.00 |
| | Total (for filings under Rule 504 only) | | 3_10,000.00 |
| 3. | Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | |
| | Type of Offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | | \$ |
| | Regulation A | | \$ |
| | Rule 504 | | \$_0.00 |
| | Total | | \$_0.00 |
| 4 | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| | Transfer Agent's Fees | | \$ |
| | Printing and Engraving Costs | | \$ |
| | Legal Fees | | \$ 11,000.00 |
| | Accounting Fees | | \$ |
| | Engineering Fees | _ | \$ |
| | Sales Commissions (specify finders' fees separately) | | \$ |
| | Other Expenses (identify) | _ | \$ |
| | Total | | \$ 11,100.00 |

| | C. OFFERING PRICE, NUM | BER OF INVESTORS, EXPENSES AND USE OF PI | ROCEEDS | |
|------|---|--|--|-----------------------|
| | b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer." | | | \$ |
| 5. | Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part | y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross | | |
| | | | Payments to Officers, Directors, & Affiliates | Payments to Others |
| | Salaries and fees | |] \$ | |
| | Purchase of real estate | |] \$ | |
| | Purchase, rental or leasing and installation of mad and equipment | chinery [| | . 🗆 \$ |
| | Construction or leasing of plant buildings and fac | | | |
| | Acquisition of other businesses (including the val offering that may be used in exchange for the asse issuer pursuant to a merger) | ets or securities of another | ן\$ | □\$ |
| | Repayment of indebtedness | - | | |
| | Working capital | | | |
| | Other (specify): | | s | |
| | | | | |
| | Column Totals | [| \$ 0.00 | \$_988,900.00 |
| | Total Payments Listed (column totals added) | | ≥ \$_9 | 88,900.00 |
| | | D. FEDERAL SIGNATURE | | |
| sig | issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc | mish to the U.S. Securities and Exchange Commiss | sion, upon writte | |
| Issi | ner (Print or Type) | Signature I | Date | |
| Pr | om Resources, Inc. | M. Man May | 1/18/07 | |
| Na | ne of Signer (Print or Type) | Title of Signer (Print or Type) | | |
| ٥nC | Moradov | President | | |
| | | <u> </u> | - | |

- ATTENTION --

| | | E. STATE SIGNATURE | | | |
|----------|---|--|-------------------------------------|---------------------------------------|----------------|
| t. | Is any party described in 17 CFR 230.262 provisions of such rule? | , , , | | Yes | No E |
| | 5 | See Appendix, Column 5, for state re | sponse. | | |
| 2. | The undersigned issuer hereby undertakes D (17 CFR 239.500) at such times as requ | - | any state in which this notice is f | iled a no | tice on Form |
| 3. | The undersigned issuer hereby undertakes issuer to offerees. | s to furnish to the state administrator | s, upon written request, informa | tion furn | ished by the |
| 4. | The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of estab | e state in which this notice is filed an | d understands that the issuer clai | | |
| | uer has read this notification and knows the co thorized person. | ontents to be true and has duly caused t | his notice to be signed on its beha | ılf by the | undersigned |
| Issuer (| Print or Type) | Signature | Date | · · · · · · · · · · · · · · · · · · · | |
| Prom R | lesources, Inc. | 100000000000000000000000000000000000000 | 7 1/18/07 | | |
| Name (| Print or Type) | Title (Print or Type) | | | |

President

Instruction:

Dror Moradov

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 4 2 3 1 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach explanation of offering price Type of investor and to non-accredited amount purchased in State waiver granted) investors in State offered in state (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited No No Investors Amount Yes Yes Investors Amount State ΑL ΑK ΑZ AR $\mathsf{C}\mathsf{A}$ CO CTDE DC FL GA Н ID IL IN ΙA KS KYLA ME MDMA MI common stock, \$1,000,000 \$10,000.00 X MN 1 MS

APPENDIX 5 2 3 1 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell explanation of offering price Type of investor and to non-accredited waiver granted) offered in state amount purchased in State investors in State (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Accredited Non-Accredited No Investors **Investors** Amount Yes Amount Yes No State MO MT NE NV NH NJ NM NY NC ND ОН OK OR PA RΙ SCSD TN TXUT VTVA WA $\mathbf{W}\mathbf{V}$ WI

| | APPENDIX | | | | | | | | | | | |
|-------|----------|---|--|--|---------------------------|--|---|----|---|--|--|--|
| 1 | | 2 | 3 | | 4 | | | | lification | | | |
| | to non-a | d to sell accredited is in State 3-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | Type of investor and amount purchased in State (Part C-Item 2) | | | Type of investor and explar amount purchased in State waive | | tate ULOE , attach nation of r granted) Item 1) | | | |
| State | Yes | No | | Number of Accredited Investors | Accredited Non-Accredited | | Yes | No | | | | |
| WY | | | | | | | | | | | | |
| PR | | | | | | | | | | | | |

END